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FILE COPY**FACSIMILE COVER SHEET****Date:** July 16, 2002**To:** Ms. Delora Dillard
Office of Initial Patent Examination (OIPE)
U.S. Patent and Trademark Office**RECEIVED**

JUL 31 2002

TECH CENTER 1600/2900

Client Code: 3298.1003-000**Fax Number:** (703) 305-9822**From:** David E. Brook, Esq.**Subject:** Request for Corrected Filing Receipt for
Utility Application No.: 10/087,996
Attorney Docket No.: 3298.1003-000Number of pages including this cover sheet: 7Please confirm receipt of facsimile: Yes No **Comments:**

On the Updated Filing Receipt that we have received for the referenced application, the residential address for the inventor is still recorded as "Residence Not Provided", even though an executed Declaration with the residence of "Miami, Florida" was mailed to the USPTO on June 17, 2002 under Certificate of Mailing in response to the Notice to File Missing Parts. Copies of the Updated Filing Receipt with the correction marked thereon, Reply to Notice to File Missing Parts of Application, and executed Declaration are enclosed for the convenience of the USPTO. Please add the residential address for the inventor in the USPTO records and issue a corrected Filing Receipt indicating that this has been done. Thank you.

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UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
 UNITED STATES PATENT AND TRADEMARK OFFICE
 WASHINGTON, D.C. 20231
 www.uspto.gov

APPLICATION NUMBER	FILING DATE	GRP/ART UNIT	FIL/FILE REC'D	ATTY./DOCKET.NO.	DRAWINGS	TOT CLAIMS	IND CLAIMS
10/037,996	02/28/2002	1614	1257	3298.1003-000	29	88	8

CONFIRMATION NO. 2676

UPDATED FILING RECEIPT



OC00000008427449

021005
 HAMILTON, BROOK, SMITH & REYNOLDS, P.C.
 530 VIRGINIA ROAD
 P.O. BOX 9133
 CONCORD, MA 01742-9133

Date Mailed: 07/10/2002

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Brian Leyland-Jones, Residence Not Provided

MIAMI, FL

Domestic Priority data as claimed by applicant

THIS APPLN CLAIMS BENEFIT OF 60/271,714 02/28/2001

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Foreign Applications

If Required, Foreign Filing License Granted 04/12/2002

Projected Publication Date: 10/17/2002

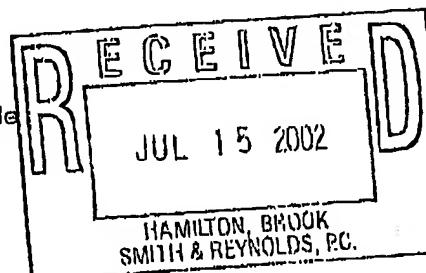
Non-Publication Request: No

Early Publication Request: No

** SMALL ENTITY **

Title

Use of metabolic phenotyping in individualized treatment with amonafide



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Preliminary Class

514

**LICENSE FOR FOREIGN FILING UNDER
Title 35, United States Code, Section 184
Title 37, Code of Federal Regulations, 5.11 & 5.15**

GRANTED

The applicant has been granted a license under 35 U.S.C. 184, if the phrase "IF REQUIRED, FOREIGN FILING LICENSE GRANTED" followed by a date appears on this form. Such licenses are issued in all applications where the conditions for issuance of a license have been met, regardless of whether or not a license may be required as set forth in 37 CFR 5.15. The scope and limitations of this license are set forth in 37 CFR 5.15(a) unless an earlier license has been issued under 37 CFR 5.15(b). The license is subject to revocation upon written notification. The date indicated is the effective date of the license, unless an earlier license of similar scope has been granted under 37 CFR 5.13 or 5.14.

This license is to be retained by the licensee and may be used at any time on or after the effective date thereof unless it is revoked. This license is automatically transferred to any related application(s) filed under 37 CFR 1.53(d). This license is not retroactive.

The grant of a license does not in any way lessen the responsibility of a licensee for the security of the subject matter as imposed by any Government contract or the provisions of existing laws relating to espionage and the national security or the export of technical data. Licensees should apprise themselves of current regulations especially with respect to certain countries, of other agencies, particularly the Office of Defense Trade Controls, Department of State (with respect to Arms, Munitions and Implements of War (22 CFR 121-128)); the Office of Export Administration, Department of Commerce (15 CFR 370.10 (j)); the Office of Foreign Assets Control, Department of Treasury (31 CFR Parts 500+) and the Department of Energy.

NOT GRANTED

No license under 35 U.S.C. 184 has been granted at this time, if the phrase "IF REQUIRED, FOREIGN FILING LICENSE GRANTED" DOES NOT appear on this form. Applicant may still petition for a license under 37 CFR 5.12, if a license is desired before the expiration of 6 months from the filing date of the application. If 6 months has lapsed from the filing date of this application and the licensee has not received any indication of a secrecy order under 35 U.S.C. 181, the licensee may foreign file the application pursuant to 37 CFR 5.15(b).

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D:\BIDES\ca
06/17/02

PATENT APPLICATION
Docket No.:3298.1003-000

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Brian Leyland-Jones
 Application No.: 10/087,996 Group: 1614
 Filed: February 28, 2002
 For: USE OF METABOLIC PHENOTYPING IN INDIVIDUALIZED
 TREATMENT WITH AMONAFIDE

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, P.O. Box 2327, Arlington, VA 22202	
on <u>4/17/02</u>	<u>Christine M. Leveen</u> Signature
<u>Christina M. Leveen</u> Typed or printed name of person signing certificate	

COPY

REPLY TO NOTICE TO FILE MISSING PARTS OF APPLICATION

RECEIVED

JUL 31 2002

TECH CENTER 1600/2900

REOY Missing Parts
 Assistant Commissioner for Patents
 P.O. Box 2327
 Arlington, VA 22202

Sir:

In reply to the Notice to File Missing Parts dated April 15, 2002, the following documents and fees are being submitted for filing in the captioned application. A copy of the Notice is attached.

EXECUTED DECLARATION FOR PATENT APPLICATION
(Separate transmittal letter and postcard not required)

POWER OF ATTORNEY DOCUMENT
 GRANTED BY INVENTOR(S)
 GRANTED BY ASSIGNEE, including Statement under 37 C.F.R. 3.73(b)
(Separate transmittal letter and postcard not required)

PRELIMINARY AMENDMENT
(Separate transmittal letter and postcard not required)

FILING FEE - with Fee Transmittal for Patent Applications in duplicate
 Fee calculations based on:
 Claims as originally filed
 Claims upon entry of the Preliminary Amendment filed herewith
(Separate transmittal letter and postcard not required)

SURCHARGE - surcharge fee of \$130.00
(Separate transmittal letter and postcard not required)

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10/087,996

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COPY

SEQUENCE LISTING - Filed concurrently and is attached
(Separate transmittal letter and postcard required)

SUBSTITUTE DRAWINGS

Sheets of substitute drawings consisting of Figs. 1 - [] are enclosed
(Separate transmittal letter and postcard not required)

PETITION FOR EXTENSION OF TIME

Applicant hereby petitions to extend the time to respond to the Notice to File Missing Parts dated [] for [] month from [] to [].
The appropriate fee of \$[] is included in the enclosed check

A [] month extension of time to respond to the Notice to File Missing Parts dated [] was filed on [] with payment of a \$[] fee

Applicant hereby petitions for an additional [] month extension of time to respond to the Notice to File Missing Parts. The appropriate fee of \$[] is included in the enclosed check

(Separate Petition for Extension of Time and postcard not required)

REQUEST FOR CORRECTED FILING RECEIPT - Filed concurrently and is attached
(Separate transmittal letter and postcard required)

TWO STATEMENTS CLAIMING SMALL ENTITY STATUS

Was filed on []

Are enclosed herewith
(Separate transmittal letter and postcard not required)

In view of the small entity status of the captioned application, we hereby request a reimbursement of 50% of the filing fees in the amount of \$[] which were paid on [] to be deposited in Deposit Account No. 08-0380

The fees required for filing the indicated documents are enclosed in the form of a check in the total amount of \$1322. Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this letter is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Darlene E. Sanders
Darlene E. Sanders
Registration No.: 42,122
Tel.: (978) 341-0036
Fax: (978) 341-0136

Concord, Massachusetts 01742-9133
Date: June 17, 2002

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DOCKET NO. 3298.1003-000

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Declaration for Patent Application**COPY**

[] Supplemental (37 C.F.R. §1.67)

As a named inventor, I hereby declare that:

My residence, mailing address and citizenship are as stated next to my name;

I believe I am the original, first and sole inventor (if only one name is listed) or an original, first and joint inventor (if plural names are listed in the signatory page(s) commencing at page 2 hereof) of the subject matter which is claimed and for which a patent is sought on the invention entitled

LIST OF METABOLIC PHENOTYPING IN INDIVIDUALIZED TREATMENT WITH AMONAFIDE

the specification of which (check one)

[] is attached hereto.
 [] was filed on February 28, 2002 as United States Application

Number of PCT International Application No. 10/087,996

and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119 or 365 of any foreign application(s) for patent or patent's certificate, or of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or patent's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed:

<u>Prior Foreign Application(s)</u>	<u>Priority Not Claimed</u>	<u>Certified Copy Filed?</u>
	YES	NO
(Number) _____ (Country) _____ (Day/Month/Year filed) _____	_____	_____
(Number) _____ (Country) _____ (Day/Month/Year filed) _____	_____	_____
(Number) _____ (Country) _____ (Day/Month/Year filed) _____	_____	_____

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

COPY

Full name of sole inventor _____
or first inventor Brian Leyland-Jones
Inventor's Signature _____ Date 2 May 2, 2002
Residence _____ 86 S.W. Eighth Street, Suite 200
Miami, Florida 33130
Citizenship _____ U.S.A., Great Britain, and Canada
Mailing Address _____ Same as above

Full name of second joint inventor, if any _____
Inventor's Signature _____ Date _____
Residence _____
Citizenship _____
Mailing Address _____

Full name of third joint inventor, if any _____
Inventor's Signature _____ Date _____
Residence _____
Citizenship _____
Mailing Address _____

Full name of fourth joint inventor, if any _____
Inventor's Signature _____ Date _____
Residence _____
Citizenship _____
Mailing Address _____

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